

2019 Nutrition Services Plan Guidance Webinar

June 21, 2018 9:00-10:00 am





ur Mission. To protect and improve the health and environment of all Kansans



Agenda

9:00 - 9:05 am	Welcome
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Objectives

- Describe the importance of writing a Nutrition Services Plan every year.
- List at least three components of the Nutrition Services Plan.
- Successfully write an Action Plan that includes clear objectives, action steps, person responsible, and timeline.



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Background of Guidance

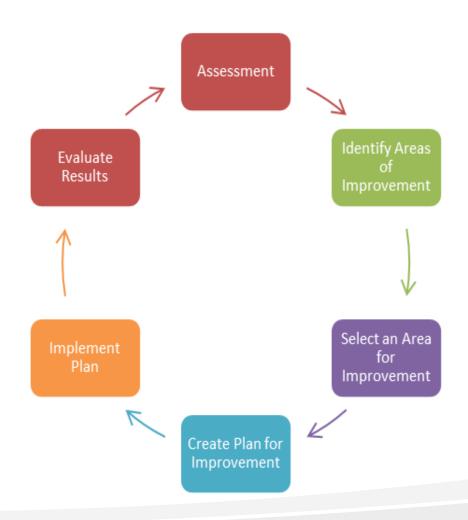
The requirement that local agencies have a Nutrition Services Plan is part of the USDA WIC regulations.



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Background of Guidance: NSP Process





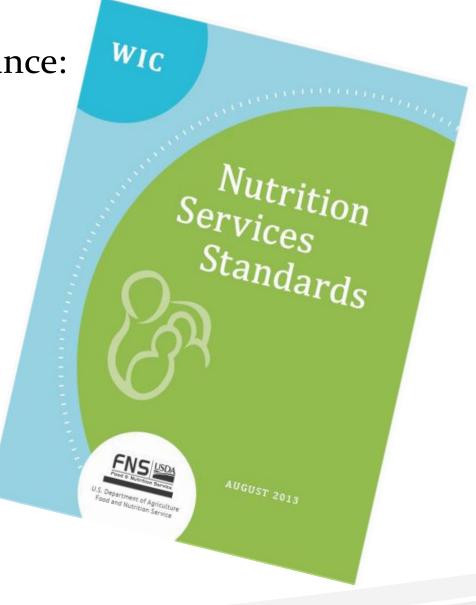
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Background of Guidance: Why We Do NSPs

Background:

Based on the 2013 USDA WIC Nutrition Services Standards.





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Background of Guidance: Kansas Selected Standards to Focus On

Standard 8. Breastfeeding Education, Promotion and Support

The State and local agency defines and establishes the breastfeeding education plan, policies, procedures and <u>competency-based staff training</u> to ensure the provision of high quality and comprehensive breastfeeding education, promotion and support.

Standard 9. Breastfeeding Peer Counseling

The State and local agency establish standardized breastfeeding peer counseling program policies and procedures and task-appropriate training for staff on the breastfeeding peer counseling program that are consistent with the Loving Support Model for a Successful Peer Counseling Program.

Standard 15. Breastfeeding Data Collection

The State agency ensures that appropriate breastfeeding data are collected at the State and local agency levels

Standard 2. Clinic Environment and Customer Service

State and local agencies ensure that WIC operations provide <u>participant-centered services</u> in an environment that communicates respect and is conducive to participants achieving positive health outcomes.





Background of Guidance: Kansas Selected Standards to Focus On, cont.

Standard 5. Staff Training

The State and local agency ensure that staff receive sufficient orientation, <u>competency-based training</u> and, as appropriate, continuing education activities (quarterly recommended) as well as periodic performance evaluations.

Standard 6. Nutrition Assessment

The State and local agency ensure that staff perform a comprehensive nutrition assessment using <u>Value Enhanced Nutrition Assessment</u> (VENA) policy and guidance to provide quality nutrition services in a <u>participant-centered</u> framework and to determine program eligibility.

Standard 7. Nutrition Education and Counseling

The State and local agency establishes policies to ensure development, implementation, evaluation and dissemination of quality nutrition education, breastfeeding promotion and support and materials that deliver accurate, relevant and consistent messages to participants or, when appropriate, to their caregivers or proxies, to achieve optimal health outcomes in relation to their nutritional status and/or their nutrition-related concerns and goals. 1, 2





Background of Guidance: Kansas Selected Standards to Focus On, cont.

Standard 10. Program Coordination

The State and local agency coordinate program operations with services of other public and private programs at the local, State and National level that will benefit participants.

Standard 11. Participant Referrals

The State and local agency ensure the provision of appropriate referrals to health and public assistance programs to Program applicants, participants and designated proxies.

Standard 13. Food Package Prescriptions

The local agency authorizes a competent professional authority (CPA) to prescribe food packages that address a participant's eligibility category and nutritional needs and make available the maximum monthly allowances of State-authorized supplemental foods to a participant.



Standard 14. Nutrition Services Documentation

The State and local agency develop documentation policies and procedures that facilitate clear communication between staff as well as a seamless continuum of care for participants.¹





Background of Guidance: NSP Policy

POLICY: ADM: 04.00.00

Page 1 of 1

Subject: Nutrition Services Plan

Effective Date: October 1, 2016

Revised from: October 1, 2010

Policy: Agencies shall develop an annual *Nutrition Services Plan* that is consistent with the State's nutrition goals and objectives. The annual plan shall adhere to State guidance and be submitted by November 1 of each year. The licensed dietitian and local Nutrition Services Coordinator (if not the same person) coordinate the development of the plan with input from all WIC staff (including clerks and Health Department Administrators). The Agency shall share appropriate components of their plans with their partners, including other public and private organizations.

Reference: CFR §246.11, WIC Nutrition Services Standard 5

Procedure:

- The Nutrition Services Plan Guidance is provided by the State Agency to Local Agencies in May of each year. (See Appendix 2 for the current guidance materials)
- The Agency will submit its plan to its assigned State Nutritionist by November 1 each year. The State Nutritionist will notify each local agency of the approval of its plan. If the plan is incomplete or not approved, the Nutritionist will notify the local agency of the revisions required before giving final approval.
- The plan will include:

A review of the previous year's Breastfeeding and Nutrition Action Plans;

Breastfeeding and Nutrition Strategic Action Plans for the coming year including goals and objectives, based upon a needs assessment; and

A description of nutrition education efforts planned for the coming year.

The Nutrition Services Plan may include other sections related to breastfeeding and nutrition education standards.





Overview





Overview:

What is Different From Last Year?

LAs will develop **their own** Strategic Action Plans that will most help their agency improve in the areas identified in the self-evaluation.

Expert Tip:
It's back to the way it used to be!





Overview: Timeline

May 2018 – Guidance materials released

June 21, 2018 – Live webinar + recording

June 2018 – September 2018 – Write NSP

October 2018 – Lead person finalizes NSP

November 1, 2018 –NSP due!

January 1, 2019 – Start implementing 2019 NSP



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Overview: Checklist

- Cover Sheet
- Clinic Staff Summary Sheet
- Clinic Operations
- Evaluation of 2018 Coffective Breastfeeding Promotion Action Plan
- Evaluation of 2018 Clinic Improvement Action Plan
- Breastfeeding Promotion Needs Assessment
- 2019 Breastfeeding Promotion Strategic Action Plan
- Clinic Improvement Needs Assessment
- 2019 Clinic Improvement Strategic Action Plan
- 2019 Nutrition Education Offerings

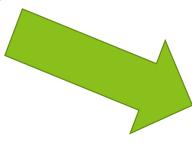




NSP Forms

- Cover Sheet (Tip: Be sure to involve all staff in NSP writing)
- Clinic Staff Summary Sheet

Clinic Operations



Expert Tip: Clinic Operations is new!



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NSP Forms:

Evaluation of Previous Year's Action Plan

- Evaluation of Previous Year's Action Plan
 - Coffective
 - Clinic Improvement Action Plan

- Tips for both:
 - Be honest
 - Learn from your results—What worked? What didn't?
 - Objectives
 - Action Steps
 - Evaluation
- Sharing
 - We love great stories—please send them!





NSP Forms:

Breastfeeding Promotion Needs Assessment

Data Source	Statewide WIC	County	Kansas	United States
2014 National Immunization Survey (CDC) for Breastfeeding Initiation Rates			77.1%	82.5%
2016 Breastfeeding Initiation Birth Certificate Data			88.1%	
2017 Breastfeeding Initiation from KWIC	77.4%	E	mert Tip	p:
Exclusive Breastfeeding to 6 months from KWIC	13.5%	I E	xpert Tip VEW!	
ansas			VEW: We now provide rates!	the





NSP Forms: Breastfeeding Promotion Needs Assessment

Standards (see pages 4-5): Breastfeeding Education, Promotion and Support **Breastfeeding Peer Counseling Breastfeeding Data Collection** Assessment Potential Action Plan Steps Area Maternity Care Local hospital is Baby Work with hospital to help become Baby Friendly - assist hospital to reach one or more of the Practices Friendly facility. 10 steps. (A Baby Friendly hospital completes a multi-year national program that includes a site visit.) https://www.babyfriendlyusa.org/find-facilities/designated-facilities--by-state Local hospital is a High 5 Assist hospital in achieving High 5 status. facility. Order "High 5 for Mom and Baby" bookmarks from the Kansas WIC Publications Order Form. Distribute information to pregnant clients about "High 5" and help mothers develop a birthing plan that includes the 5 steps. Find information and sign the pledge at http://ksbreastfeeding.org/cause/breastfeeding-___Health Department and/or WIC clinic displays welcome-here/ "Breastfeeding Welcome Here" decal and has signed the pledge. Health Department and/or Work toward achieving Baby Friendly health department guidelines. See WIC clinic is designated as https://www.co.dakota.mn.us/healthfamily/healthservices/wic/documents/breastfeedingfrie Breastfeeding Friendly. ndlyhealthdepartmenttoolkit.pdf http://www.health.state.mn.us/divs/oshii/bf/healthdepttookkit.html __Lactation room is available Develop or improve lactation room. for staff and clients. Attend the KS Attend the KS La Leche League annual meeting or a Certified Lactation Educator class. Professional ___Staff attend trainings about Education breastfeeding promotion and support. Watch the WIC I-Memo for education opportunities. Apply for training funds - read Policy ADM: 11.02.00





NSP Forms:

Clinic Improvement Needs Assessment

Standard - Clinic Environment and Customer	Service (see pages 4 – 5)		
Area	Assessment	Potential Action Plan Steps	
Provide a clean, comfortable, inviting and child-friendly reception/waiting area.	Check those which your clinic has: area for children to playtove for children in waiting area and plinic rooms,	Plan to update reception/waiting room area. Set up a special "play" area in waiting room or clinic rooms.	
	including some with a nutrition, health or food association	Purchase toys.	
	books for comments wereing area and clinic rooms comfortable chairs for clients attractive posters or wall hangings with nutrition or breastfeeding information	Purchase books for children.	
The clinic environment demonstrates respect and is conducive to participants achieving positive health outcomes.	We have a TV or laptop that loops the WIC Health Channel or other health messaging.	Set up meetings/calls to discuss having rotating educational displays in the WIC waiting area.	
delivering positive health outcomes.	— We work with our Extension, SNAP-Ed or other partners to share materials/displays for our waiting room.	Arrange assessment/counseling areas so that staff can sit face-to-face with client for at least part of the appointment.	
	Client and staff face each other, for example: sit knee-to-knee with no desk between during the assessment and counseling portion.	Bring in speaker to present on client-centered counseling.	
	Staff look at client when assessing and counseling — then pause if necessary to enter information into computer.	Staff practice with each other "looking at client" while assessing and counseling.	
	Signs used in clinic waiting rooms and offices use positive language, for example, "enjoy your cell phone conversation outside the clinic area", instead of "no cell phones." Our materials, brochures and bulletin boards all have current information and we regularly check our waiting room to make sure outdated materials are	Assess signage and replace with positive messages EXPE NEV	rt Tip: V ideas are uded
	removed.	incl	udeu





Writing Objectives and Action Steps





To Increase Our Referrals, is not an adequate objective.

An acceptable objective could still be to increase referrals, but needs to be more specific. For example, *Increase the total number of referrals by 20% between 1/1/19 – 8/31/19*.

This objective answers all four questions.

- <u>the problem</u> clients may not be receiving all appropriate referrals
- the target audience all clients
- the time frame 1/1/19 8/31/19
- the amount of change expected the total number of referrals will increase by 20%





To make pregnant women aware of their Medicaid benefits, is not an adequate objective.

For this objective, it is written in a different way. It is formatted as a list instead of a sentence.

Acceptable objective:

- <u>the problem</u> Pregnant and breastfeeding women on WIC are unsure of their benefits through their Medicaid card.
- the target audience Pregnant and Breastfeeding women
- the time frame January 1, 2019 December 31, 2019
- the amount of change expected Pregnant and breastfeeding women are aware of and fully utilize all benefits afforded them with Medicaid.





To increase our breastfeeding incidence rate, would not be an acceptable objective.

A more specific objective might be: To increase our breastfeeding incidence rate by the end of the 3rd quarter of 2019 from 66.7% (in 2018) to 70 %. Target prenatal women from January 1, 2019 through September 30, 2019.

This objective answers all four questions.

- <u>the problem</u> increase breastfeeding incidence rate
- <u>the target audience</u> prenatal women
- <u>the time frame</u> 1/1/19 8/31/19
- <u>the amount of change expected</u> increase the incidence rate from 66.7% (2018 rate) to 70% in the 3rd quarter of 2019





One more example, To increase the visibility of WIC in our community, would not be an acceptable objective.

A more specific objective might be: To hold a Family Fun Fair in the parking lot of our clinic in August 2019 to make WIC more visible in the community and to make potential WIC clients aware of WIC.

This objective answers all four questions.

- <u>the problem</u> –people in the community and potential clients may not know about WIC
- the target audience families in our community
- the time frame 1/1/19 8/31/19
- the amount of change expected people in our community will learn about WIC, which may result in clients who are eligible for WIC will apply for WIC





Another example, *To decrease the use of sippy cups*, would not be an acceptable objective.

A more specific objective might be: To assist families in avoiding using sippy cups, WIC staff will educate on the use of an open cup at 6 month midcerts and certs for 1 year olds during 1/1/19 - 5/31/19. This will result in 25% fewer clients marking on the diet questionnaire their child 1 $\frac{1}{2}$ or 2 uses sippy cups. This objective answers all four questions.

- the problem –families are inappropriately using sippy cups and are not introducing the use of open cups
- <u>the target audience</u> WIC families with 6 month and 1 year old children
- the time frame 1/1/19 5/31/19
- the amount of change expected the number of families that are still using sippy cups at 1, 1 1/2 and 2 yrs old will decrease by 25%





Writing Objectives and Plans: Action Steps

Staff will discuss with at least 50% of pregnant and breastfeeding women their Medicaid benefits and encourage them to use the benefits.

- Action Step #1: Contact representatives from each Medicaid provider group and invite them to have a table in the WIC Waiting Room to discuss services offered.
- Action Step #2: Ask the representatives from each Medicaid provider group to attend and present at a WIC staff meeting to explain their services.
- Action Step #3: Have an out-stationed Medicaid Eligibility
 Specialist attend a WIC staff meeting to explain their services.
- Action Step #4: Gather current information regarding breast pumps from each Medicaid provider and revise breast pump handout as needed for distribution to pregnant and breastfeeding women.





Breaking Down the Action Steps

The objective is the same: Staff will discuss with at least 50% of pregnant and breastfeeding women their Medicaid benefits and encourage them to use the benefits. The action steps will be changed to break down Action Step #2 above:

- 1. Obtain contact information for each Medicaid provider.
- 2. Request by phone call, email or letter for one of their staff to come to the clinic and share with WIC staff information on the benefits they provide..
- 3. Based on the number of providers and their staff that are coming, decide which meeting room will be used.
- 4. Decide whether the meeting time will be blocked out in the KWIC appointment book.
- 5. Communicate with staff about the meeting subject, date and time.
- 6. A staff member will meet the reps on their arrival. Find out if there is anything they need, and if time allows we will share with them a little about our clinic.
- 7. At the end of the meeting, when the reps have left or on a different day, staff will be asked their thoughts on the information that was shared and how staff will share the information with clients.
- 8. Implement the plan of how the information will be shared with clients.





Objectives Include the problem to be addressed, target audience, time frame, and the amount of change expected.	Action Steps Minimum of 3 action steps included. At least one must address a significantly new or improved strategy toward your objective. Please identify new steps with "*" or bold font. Each action step should be written with sufficient detail and depth to support your	Person Responsible	Implementation Date or Date Range
	objective.		
Hold a Family Fun Fair in the parking lot of our clinic in Aug 2019 to make WIC more visible and make potential clients aware of WIC.	 *Create a Fun Fair committee and designate a chair. *The chair will oversee creating an agenda and 	WIC Coordinator Fun Fair Chair	February 2019 1 st meeting-March 1, 2019
	setting bi-weekly meetings. 3. *A referral source 8/19 Fun Fair will be created	Someone who has KWIC clearance to create this	
	in KWIC		
Short Term or Periodic Evaluation:	Description:	Person Responsible	Date or Date Range
Progress to date	Chair will report status to WIC Coordinator.	Chair & Coordinator	6/30/19
Final Evaluation:	Description:	Person Responsible	Date or Date Range
Check "referrals from" report	Check to see how many clients reported hearing of WIC at the Fair.	Chair or person designated	Report from 9/1/19 – 10/31/19





Writing Objectives and Action Plans: What Not To Do!

- Don't aim for too high of a breastfeeding rate
 - Do be realistic!
- Don't think it's all going to go fast and smooth
 - Do anticipate some bumps, like staff turnover or time it takes to coordinate schedules for a meeting, etc.
- Don't wait too long to get started
 - Remember, you have less than 1 year to make and evaluate changes
- Don't skip the short term evaluation step
 - This will tell you if you are on-track to meet your objectives





Nutrition Education Offerings Page/Table

- This is the final item from our overview checklist
- Plan for low risk secondary nutrition for the upcoming year
- Top of the page if you regularly do any one-on-one education (Nei) with low risk clients
- The basis for the information is from your lesson plans
- Lesson plans should be written by a WIC RD or approved by a WIC RD
- Extension lesson plans can be used but will need to be put into our WIC format (PPM NED 03.03.01 and lesson plan template nutrition education/lesson plan tab)



2019 Nutrition Education Offerings (The SA will send out a lesson on Family Meals in late 2018.)
☐ This table is not applicable, our clinic only offers individual nutrition education (NEI).
☐ Our clinic offers only NEI to certain client categories. These client categories are

Month(s)	Class Title	Type of Class (group, self- study notebook, Interactive center, etc.)	Client Category (PG, PP, BF, I-<6 months, I->6 months, C)	Includes Learning Objectives (Yes/No)	Brief description of class content (include how this class applies to each client category)	What is used for interactive component? (other than a quiz)	List evaluation method and how client sets their goal	Outside Instructor (Yes/No) If yes, list who
an 1, – March 31, 2019	Iron – We All Need It	Interactive center	PG, PP, BF, C, I	Yes	Importance of iron for all of us, including infants; it's why WIC checks Hgb; review sources of iron & vit C;	client will discuss with WIC staff who will have list of possible conversation starters, like – "what was something you learned?"	Client completes short questionnaire, which includes something they might use with their family (goal)	No
April 1 – une 30, 2019	Family Fun with a garden	Interactive center	PG, PP, BF, C	Yes	Gardening might help children try foods; physical activity for whole family	Same as Iron lesson, plus will receive a seed packet to take	Same as Iron lesson	EFNEP staff; when she is a clinic, she wi do interactive part with client
April 1– une 30, 2019	Baby Behavior hunger- SA	Interactive center	I < 6 months	Yes	Caregivers learn Hunger cues for infants	WIC staff will have card w/possible	Caregiver completes activity, goal	No



In Summary

- 2019 Kansas NSP is based on USDA standards
- NSPs are due November 1, 2018
- Use the Breastfeeding and Clinic Improvement Assessments as a way to identify what you want to change
- Write specific objectives and action steps that will help your Action Plans be most effective



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Where do I send the NSP?

Lisa Medrow, <u>lisa.medrow@ks.gov</u>: Cloud group, Doniphan, Grant, Jefferson, Linn, Marion, Meade group, Neosho, Reno, Saline, SEK-Multi Co, Seward, Sherman, Wyandotte

Julie Ornelas, julie.ornelas@ks.gov: Chautauqua, Crawford, Franklin, Geary, Gove, Greeley, Greenwood, Lane, Norton, Osborne group, Riley, Russell, Scott, Shawnee, Trego, Wichita

Patrice Thomsen, <u>patrice.thomsen@ks.gov</u>: Cherokee, Dickinson, Ford, Graham, Harvey, Haskell, Leavenworth, Lincoln group, Marshall, Montgomery, NEK Multi-County, Nemaha, Ness, Pawnee, Rush, Sedgwick, Sheridan, Stevens, Sumner

Kara Watts, kara.watts@ks.gov: Barton, Butler, Cowley, Douglas, Elk, Finney, Johnson, Kiowa group, Lyon, Miami, Rice, Strafford, Stanton, Wilson



Questions & Answers

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